

CLAIMS ONLY

Application Number
 19 524165
 Applicant(s)

* May be used for additional claims or a

CLAIMS	27-05		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT						
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	
1	1							51			
2		1						52			
3		1						53			
4		1						54			
5		1						55			
6		1						56			
7		1						57			
8		1						58			
9	1							59			
10		1						60			
11		1						61			
12		1						62			
13		1						63			
14		1						64			
15		1						65			
16		1						66			
17	1							67			
18		1						68			
19	1							69			
20		1						70			
21		1						71			
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44								94			
45								95			
46								96			
47								97			
48								98			
49								99			
50								100			
Total Indep	4							Total Indep			
Total Depend	17							Total Depend			
Total Claims	21							Total Claims			